

HAWAII STATE ETHICS COMMISSION

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Web site: www.hawaii.gov/ethics

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LOBBYIST REGISTRATION FORMATE OF HAWAII (Type or Print Clearly)

PART I LOBBYIST			
NAME (Last)	(First)	(Middle)	TELEPHONE
Young	Madeleine	M.V.	(808) 536-4302
MAILING ADDRESS (Street)	•		FAX (808) 527-8088
924 Bethel Street			EMAIL mayoung@lashaw.org
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Honolulu	HI		96813
EMPLOYING ORGANIZATION (Fill in only	lobby) TELEPHONE		
Legal Aid Society of Hawai	i		(808) 536-4302
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PART II ORGANIZATION	N	
NAME OF ORGANIZATION YOU	TELEPHONE	
Legal Aid Society of Haw	(808) 536-4302	
MAILING ADDRESS (Street)		FAX (808) 527-8088
924 Bethel Street		EMAIL mayoung@lashaw.org
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NAME OF PERSON RESPONSIBLE I	TELEPHONE	
Wayne Keawe		(808) 527-8060
MAILING ADDRESS (Street)		FAX (808) 527-8088
924 Bethel Street		EMAIL wakeawe@lashaw.org
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PART III DESCRIPTIO	N OF SUBJECTS UPON WH	ICH YOU EXPECT TO LOBI	3Y	
☐ Agriculture	Education	☐ Human Services	Science, Technology & Economic Development	
Communications & Public Utilities	Government Operation & Finance	 Intergovernmental Relations, International Affairs 	☐ Tourism & Recreation	
Consumer Protection & Commerce	Hawaiian Affairs	Labor & Employment	☐ Transportation	
Culture, Arts, Historic Preservation	☐ Health	Planning, Land & WaterUse Management	Other: (indicate below)	
Ecology, Energy Environmental Protection	Mousing	Public Safety & Corrections		
PART IV CERTIFICATI	ON OF LOBBYIST			
I hereby certify that t	he information furnished abov	re is, to the best of my knowle	edge, correct and complete.	
Modelar MV You (Signature of Lobbyist)			1-14-2013	
	(Signature of Lobbyist)		(Date)	
PART V AUTHORIZAT	TION TO LOBBY		<u> </u>	
NAME		TITLE OF AUTHORIZING OFFIC	ER OR PERSON REPRESENTED	
WAYNE KER	UE	comptroller TELEPHONE		
NAME OF ORGANIZATION (if applicable)			TELEPHONE	
Legal Aid Society of Hawaii			(808) 536-4302	
MAILING ADDRESS (Street)			FAX (808) 527-8088	
924 Bethel Street			EMAIL WALLANG @ lashaw.org	
(City)	(State)		(Zip Code)	
Honolulu	HI		96813	
I hereby authorize th	e above - named person to er	ngage in lobbying activities or	behalf of the undersigned.	
Waxa	dun-	. -	1/05/13	
(Signature of	Authorizing Officer or Person Repres	sented)	(Date)	

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